EXHIBIT 10

SavaDx Exposed

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A revolutionary diagnostic for Alzheimer's Disease or a scam of scientifically illiterate investors?

What is SavaDx?

About SavaDx

SavaDx is Cassava Sciences' investigational diagnostic to detect Alzheimer's disease. The goal of SavaDx is to make the detection of Alzheimer's as simple as getting a blood test, possibly years before the appearance of any overt clinical symptoms. SavaDx was substantially funded by a peer-reviewed research grant award from the National Institutes of Health (NIH).

SavaDx – A Novel Diagnostic/Biomarker for AD

- SavaDx is a blood-based diagnostic/biomarker for Alzheimer's disease (AD).
 - Program benefits from significant financial support from the National Institute on Aging (NIA).
- SavaDx was discovered in collaboration with Prof. Hoau-Yan Wang, PhD (CUNY) under academic research funding provided by Cassava Sciences.
 - Worldwide commercial rights owned exclusively by Cassava Sciences.
- SavaDx is an investigational product candidate.
 - The U.S. Food and Drug Administration has not reviewed or approved SavaDx for its proposed use as a diagnostic/biomarker of AD, or any other clinical indication.

SavaDx Detects an AD Proteopathy

- A 'proteopathy' refers to a protein that become structurally abnormal, and disrupts the normal function of cells, tissues and organs.
- We discovered a new proteopathy in AD: an altered form of the scaffolding protein, Filamin A (FLNA).
- SavaDx detects protein changes in blood from altered FLNA.
 - Detects abnormal protein-protein interactions in lymphocytes
 - Detects unique proteolytic products in plasma

A simple blood test that can detect AD before symptom onset

How good is SavaDx?

Amyloid Pathology). In 122 samples, the assay distinguished AD from EC with 98% accuracy and MCI-AD from MCI-SNAP with 92% accuracy. In an additional 100+ plasma samples with APOE genotyping, PTI-125-DX was 100% accurate in diagnosing control, MCI and AD. PTI-125-DX also split the MCI patients into MCI-AD and MCI-SNAP.

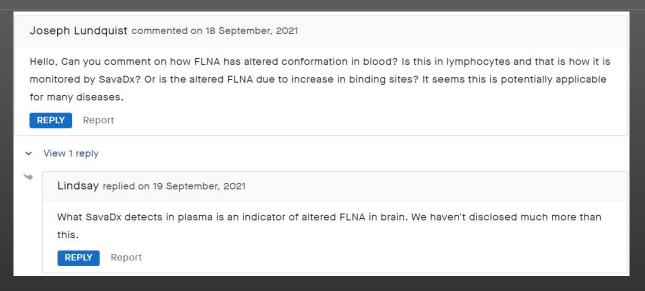
42 (A?42) hijacks to hyperphosphorylate tau protein. We have tested over 220 plasma samples and show two orders of magnitude significant differences between patients with AD diagnoses (confirmed by imaging or CSF markers) and age-matched normal controls. These two groups are distinguished with 98-100% accuracy. In one of two blinded studies, PTI- 125-DX distinguished MCI with confirmed AD pathology (MCI-AD) from MCI with suspected non-amyloid pathology (MCI-SNAP) with 92% accuracy; in the other, this distinction needs confirmation by imaging. In this

In blinded studies, our investigational diagnostic, SavaDx, detected >10-fold differences between patients with Alzheimer's and age-matched normal controls or young cognitively intact subjects (N=232).

SavaDx can distinguish:

- -Healthy elderly from Alzheimer's patients with 98% accuracy
- -Mild impaired (MCI) from Alzheimer's patients 92% accuracy

So how does SavaDx work?



SavaDx is not protected by patents, so the details are secret.

The company has not disclosed how brain FlnA is measured in blood.

Seriously, how does SAVADx work?

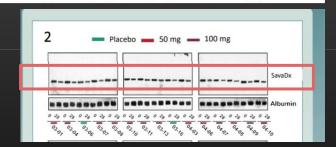
Company grants refer to a ratio of two protein fragments,

but data are presented as a single protein band?

Western blot. Although certain details are still being optimized, I am confident in both versions of this assay for diagnosis. The lymphocyte assay was tested in a clinical trial of 70 samples, which showed a 7-fold difference between AD patients (confirmed by imaging or CSF biomarkers) and age-matched controls. The plasma assay, relying on a ratio of fragments that flips, has demonstrated differences of two orders of magnitude between confirmed AD and elderly controls. For the proposed clinical trial, I will assess both versions of PTI-125-DX before

PTI is developing PTI-125-DX, a novel, quantitative blood-based diagnostic candidate for Alzheimer's disease (AD). A non-invasive and inexpensive AD diagnostic is sorely needed, particularly one with the ability to detect early pathological changes that precede cognitive symptoms. PTI-125-DX measures the ratio of two protein fragments in plasma and is a companion diagnostic/biomarker for our therapeutic candidate PTI-125. PTI-125 disrupts and

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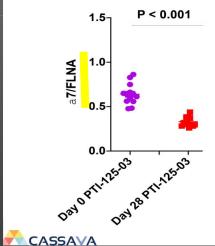


Do we have a winner?

A company presentation labels SavaDx as the ratio of the Alpha-7 nicotinic receptor to FLNA

Which ties in with Dr Wang's discovery in a grant for SavaDx

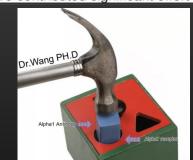
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PTI-125 significantly reduced
SavaDx values over 28 days,
demonstrating target
engagement and treatment effect
of PTI-125 in AD.

initially tested under a research agreement with your company. The original lymphocyte assay takes advantage of my finding that the association of filamin A with the alpha7 nicotinic acetylcholine receptor is elevated in both brain and lymphocytes of AD patients, and that PTI-125 treatment effects on this association in brain are mirrored in lymphocytes of PTI-treated mice. Both PTI and I have contributed significant effort to optimize procedural details of

It would all make sense, except there are no working antibodies for alpha-7



What's under the hood?

We found a clue of the proteins Cassava claims to measure in SavaDx (which they've tried to hide)

Looking at Cassava's NIH grant, one page had an unredacted reference to 90kDa FLNA

The "FLNA 90kDa" reference is indexed by Google to a PDF.

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Before

SavaDx - Pilot Di

Study A (n=44; Dr. Joel Real AD n 15 Age 75.3 (11.9) Sex 9M, 5F (1 na) MMSE 19.9 (3.3) Protein 1 10906 (3698) Protein 2 50 (0.0)

Study B (n=78; Dr. Steve AD 20 Age 68.27 (8.6) Sex 12F, 8M MMSE 16.9 (7.1) Protein 1 10201 (2691) Protein 2 122.4 (323) Ratio 1 / 2 193.5 (67.82)

218.1 (73.96)

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n		20
Age		68.27 (8.6)
Sex		12F, 8M
MMSE		16.9 (7.1)
ProteinFLNA- PS21521	90 kDA	TOSOT (S0AT)
ProteinFLNA-pS2152,2	280 kDa	122.4 (323)
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Ratio 1/2



Case 1:22-cv-09409 Document 1-12 Filed 11/02/22 Page 9 of 29 Confirmation received in the email

Email between Drs Wang & Xu contains results of a Western Blot analysis of two proteins of 90 & 280 kDa

FLNA lysate is used as a positive control, therefore the assay targets the 90 and 280kDa fragments of FLNA

In the analysis we see the 90/280 kDa ratio calculations, plus the 28d vs 0d ratio

Finally, we have the answer to **what** SavaDx actually is: the ratio of 90/280 kDA FLNA

But more questions arise...

FIOA of Email Communications of Dr. Wang

Qiang Xu <qxx07a@acu.edu> From: 01/24/2021 10:48:30 PM Sent time:

Ben Thornton \(\)gthornton@cassavasciences.com\(\); Ben Thornton \(\)gbt20a@acu.edu\(\); Hoau-Yan wang \(\) @gmail.com>: Hoau-van Wang

Subject: [EXTERNAL] 20210124 results Attachments: 20210124 Western blot results.xlsx

Hi Ben and Hoau,

Hope you are well! Attached is today's results and analysis.

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2: 20 ul Bio-Rad 1/60unstained MW Marker							
3: 60ng 1740 + 60ng A3 + 60ng A4 Peptides	1			90	-	0.606625	211317080
4:1 uL of Sample 05-005 Day 0	1			280		0.128364	830502
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Miraculous Wang: the one-band man

While SavaDx is the ratio of two protein fragments - only a single band was presented in the AAIC poster

The blots presented used **SavaDx Ab1** - which we now know to be the <u>90kDa FlnA fragment</u> (see slide 7)

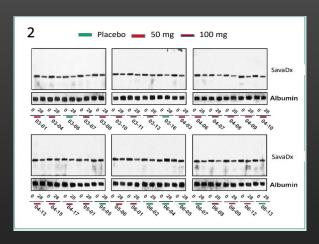
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AAIC

Immunoblots of the SavaDx assay show individual changes from Day 1 to Day 28 in plasma samples from 30 of the 64 study subjects across treatment arms (Fig. 2). These blots used SavaDx Ab1.



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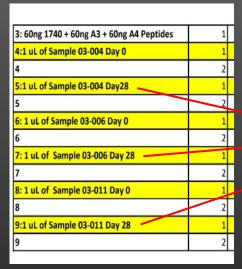
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An email exchange between Dr Qiang Xu - a co-author of the AAIC Poster - and Dr Wang was included in FOIA'd material

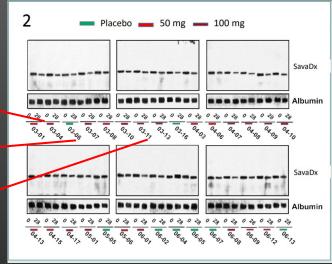
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7 of those numbers match the IDs in the SavaDx poster presented at AAIC

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AAIC Poster Presentation



Presto! We are unblinded!

You are never going to guess what happened next...

We see an entirely different band for FlnA detected with much weaker staining...



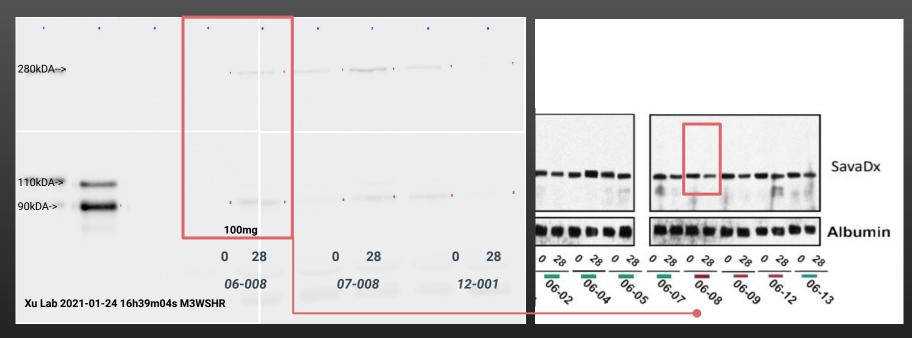
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...while the pattern of FlnA reduction that Cassava claims is not confirmed either visually (below) or by Xu's image quantitation (slide 14)...



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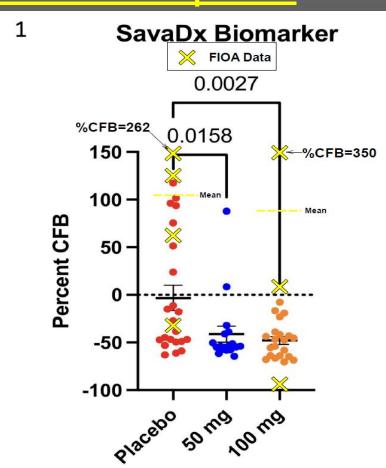
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Summary: The State* of SavaDx

- Based on Western Blot quantification = outdated
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Taking SavaDx results at face value suggests dysregulation of FlnA cleavage in AD patients

This core hypothesis has never been reported by Cassava or ANY OTHER labs

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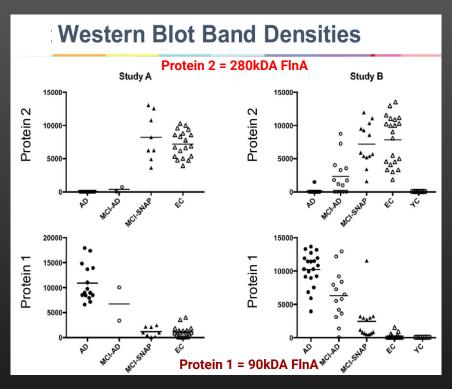
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This can be easily tested by checking whether simufilam blocks the activity of Calpain, the cleaving enzyme that turns 280kDA Flna to 90kDa

We find the implied MOA and scientific rationale

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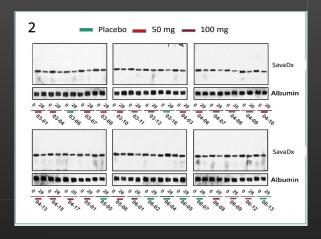
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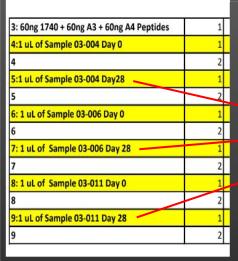
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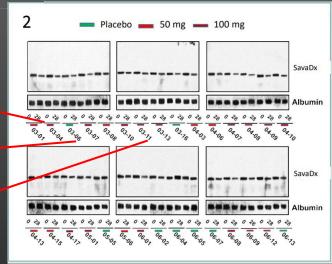
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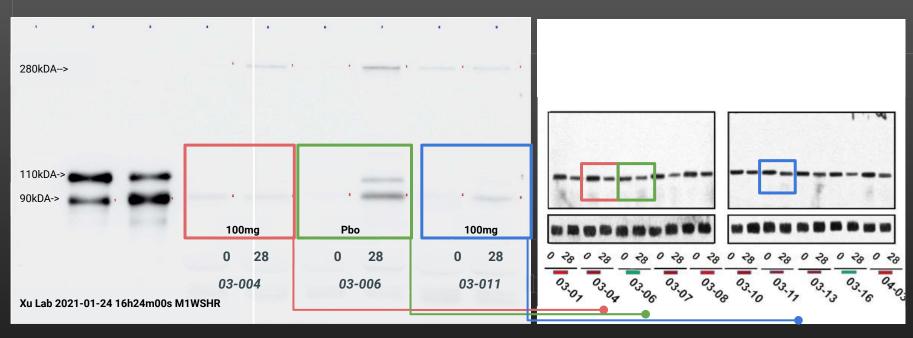


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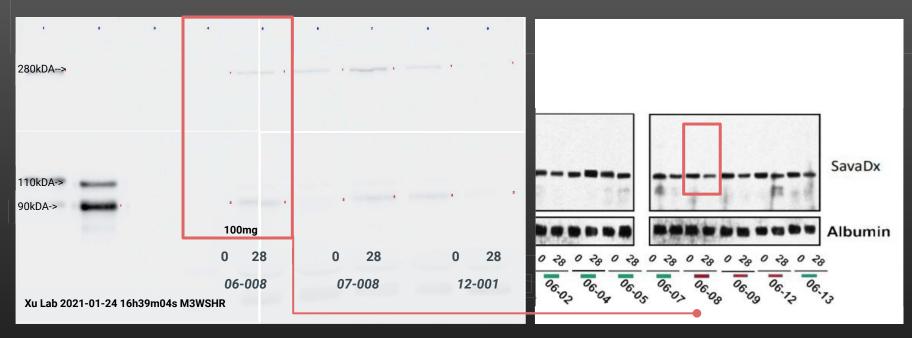
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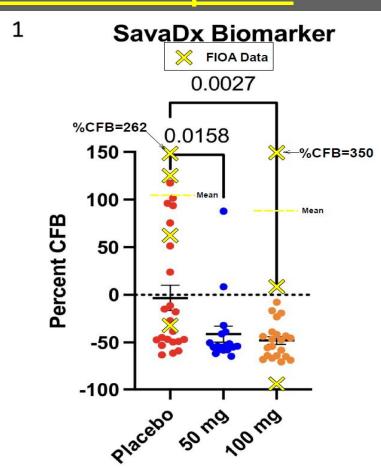
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